FORM D RECEIVED

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6) AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY					
Prefix	Serial				
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Date R	eceived				
ţ	1				

Name of Offering (check if this is an amendment and name has changed, and indicate change.)
Offer and sale of limited partnership interests	
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☒ Rule 506 ☐ S	ection 4(6) ULOE
Type of Filing: New Filing □ Amendment	
A. BASIC IDENTIFICATION DATA	5 CORANG BRANCA DE SA SESSE ARRANGA ANTARA SA SESSE ANTARA SA SESSE ANTARA SA SESSE ANTARA SA SESSE ANTARA SA S
1. Enter the information requested about the issuer	
Name of Issuer (Check if this is an amendment and name has changed, and indicate change.) Advent Latin American Private Equity Fund IV-B Limited Partnership	07070205
Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Advent International Corporation, 75 State Street, Boston, Massachusetts 02109	Telephone Nu (617) 951-9400
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Brief Description of Business	> ☆ ☆ ☆ ☆ ☆ ☆ ☆ ☆ ☆ ☆ ☆ ☆ ☆ ☆ ☆ ☆ ☆ ☆ ☆
To provide risk capital for, and make investments in the securities of, privately held and other busine	JUL 20 2007
Type of Business Organization	MOMSON
	other (please specify): FINANCIAL
□ business trust □ limited partnership, to be formed	
Actual or Estimated Date of Incorporation or Organization: Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for CN for Canada; FN for other foreign jurisdiction)	✓
GENERAL INSTRUCTIONS .	

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et sea, or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: □ Promoter □ Beneficial Owner □ Executive Officer □ Director □ General and/or Managing Partner Full Name (Last name first, if individual) LAPEF IV GP Limited Partnership (Number and Street, City, State, Zip Code) **Business or Residence Address** c/o Advent International Corporation, 75 State Street, Boston, Massachusetts 02109 ☐ General and/or Check Box(es) that Apply: ☑ Promoter □ Beneficial Owner □ Executive Officer □ Director Managing Partner Full Name (Last name first, if individual) Advent International Corporation (Number and Street, City, State, Zip Code) **Business or Residence Address** 75 State Street, Boston, Massachusetts 02109 □ Beneficial Owner □ Executive Officer □ Director □ General and/or Check Box(es) that Apply: □ Promoter Managing Partner Full Name (Last name first, if individual) (Number and Street, City, State, Zip Code) **Business or Residence Address** □ Executive Officer ☐ General and/or Check Box(cs) that Apply: □ Promoter □ Beneficial Owner □ Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

□ Beneficial Owner

(Number and Street, City, State, Zip Code)

☐ Beneficial Owner

(Number and Street, City, State, Zip Code)

□ Executive Officer

□ Executive Officer

□ Director

□ Director

☐ General and/or Managing Partner

☐ General and/or

Managing Partner

Check Box(es) that Apply:

Business or Residence Address

Business or Residence Address

Check Box(es) that Apply:

Full Name (Last name first, if individual)

Full Name (Last name first, if individual)

□ Promoter

□ Promoter

				B. INFO	ORMATIO	N ABOUT	OFFERI	NG				
1. Has the iss	uer sold, or	does the is	suer intend	to sell, to n	on accredit	ed investor	s in this off	ering?			res N □ ⊠	_
	,				Appendix, (
2. What is the		investment			••	•	_				\$ N/A	
Z. What is uit	; ;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	mvesmicin	LIIAL WIII OC	accepted	nom any m	aividdai :		****************				lo
3. Does the o	ffering peri	mit joint ow	nership of	a single uni	t?							
4. Enter the in remuneration agent of a bropersons to be Full Name (Li	for solicitat ker or deald listed are as	tion of purc er registered ssociated po	hasers in co d with the S ersons of su	nnection w EC and/or	vith sales of with a state	securities i or states, li	n the offeri st the name	ng. If a per of the brok	son to be li: er or dealer	sted is an a	ssociated p than five (:	person or
Business or R	esidence A	ddress (Nu	mber and St	reet, City,	State, Zip C	ode)				<u>.</u>		
Name of Asso	ociated Bro	ker or Deal	er			<u> </u>						
States in Whi							<u> </u>					
(•							All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT] [RI]	[NE] [SC]	[NV] [SDI	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]
Full Name (L. Business or R		_		treet, City,	State, Zip C	Code)			 			
Name of Asso	ociated Bro	ker or Deal	er									
States in Whi	ch Person l All States"	isted Has S	Solicited or dividual Sta	Intends to	Solicit Purc	hasers		,			All States	·
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full Name (L	ast name fi	rst, if indiv	idual)									
Business or R	esidence A	ddress (Nu	mber and S	treet. City.	State. Zip C	Code)						
Dusiness of N	condende 7	1441635 (114	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,		,,						
Name of Asse	ociated Bro	ker or Dea	ler		•••							
States in Whi					Solicit Purc						All States	s
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	(i.e.)	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[он]	[OK]	[OR]	[PA
(RI)	ISCI	(SD)	ואדו) ואדו	ίτχι	້າບກໍ	ίντί	(VA)	[WA]	iwvi	iwn	įWYI	[PR

C. OFFERING PRICE	NUMBER OF INVESTORS, EXPENSES AND USE	OF P	ROCEEDS		
b. Enter the difference between the aggregat 1 and total expenses furnished in response "adjusted gross proceeds to the issuer."		\$ <u>1,399,600,000</u>			
used for each of the purposes shown. If the	oss proceeds to the issuer used or proposed to be amount for any purpose is not known, furnish an estimate. The total of the payments listed must equal forth in response to Part C - Question 4.b above.				
the adjusted gross proceeds to the issuer set i	orm in response to Part C - Question 4.0 above.		Payments to Officers, Directors, & Affiliates	Payments To Others	
Salaries and fees			\$	- \$	
Purchase of real estate		s	□ \$		
	on of machinery and equipment		\$	□ \$	
Construction or leasing of plant building			□ \$ <u></u>		
Acquisition of other businesses (including offering that may be used in exchange for	ng the value of securities involved in this			_ \$	
				_ \$	
Working Capital			_ s		
			≥ \$1,399,600,000		
other (specify): 10 provide risk capit	al for, and make investments in the securities of her businesses		-	1.577.0VV.0VV	
			s	□ \$	
			s	⊠\$<u>1,399,600,000</u>	
Total Payments Listed (Column totals ac	ided)		⊠ \$ <u>1</u> ,	399,600,000	
	D. FEDERAL SIGNATURE				
following signature constitutes an undertakit	ned by the undersigned duly authorized person. If this not ng by the issuer to furnish to the U.S. Securities and Excha issuer to any non-accredited investor pursuant to paragrap	inge C	commission, upo	e 505, the on written request	
Issuer (Print or Type)	Signature General Partner:		Date		
Advent Latin American Private Equity Fund IV-B Limited Partnership		July 10, 2007			
Name of Signer (Print or Type)	Title of Signer (Print or Type)				
	Senior Vice President of Finance and Treasurer				
Janet L. Hennessy	Schiol vice Fleshett of Finance and Heastrei				

— ATTENTION —

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

